

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

Joy PAC

ADDRESS (number and street)

2821 10th St

Check if different  
than previously  
reported. (ACC)

East Moline

IL

61244

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00760629

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☒ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
06 01 2022

through

M M M / D D D / Y Y Y Y Y Y  
06 30 2022

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Kilgor, Paul, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Kilgor, Paul, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
07 20 2022

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Joy PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
06		01		2022

To:

M M	/	D D	/	Y Y Y Y Y
06		30		2022

	COLUMN A This Period	COLUMN B Calendar Year-to-Date															
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2022</td></tr></table>	Y	Y	Y	Y	Y	2022						<table><tr><td colspan="5">22149.67</td></tr></table>	22149.67				
Y	Y	Y	Y	Y													
2022																	
22149.67																	
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="5">14770.97</td></tr></table>	14770.97															
14770.97																	
(c) Total Receipts (from Line 19) .....	<table><tr><td colspan="5">13920.84</td></tr></table>	13920.84					<table><tr><td colspan="5">28736.24</td></tr></table>	28736.24									
13920.84																	
28736.24																	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="5">28691.81</td></tr></table>	28691.81					<table><tr><td colspan="5">50885.91</td></tr></table>	50885.91									
28691.81																	
50885.91																	
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="5">14050.30</td></tr></table>	14050.30					<table><tr><td colspan="5">36244.40</td></tr></table>	36244.40									
14050.30																	
36244.40																	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<table><tr><td colspan="5">14641.51</td></tr></table>	14641.51					<table><tr><td colspan="5">14641.51</td></tr></table>	14641.51									
14641.51																	
14641.51																	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Joy PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
06	/	01	/	2022

To:

M M	/	D D	/	Y Y Y Y
06	/	30	/	2022

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

5000.00

10000.00

(ii) Unitemized .....

0.00

120.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

5000.00

10120.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

5000.00

10120.00

## 12. Transfers From Affiliated/Other

Party Committees.....

8920.84

18616.24

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

## 19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)) .....

13920.84

28736.24

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

13920.84

28736.24

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	250.30	2044.40
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	250.30	2044.40
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	13800.00	31200.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	3000.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	14050.30	36244.40
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	14050.30	36244.40

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	5000.00	10120.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5000.00	10120.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	250.30	2044.40
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	250.30	2044.40

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 11

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Joy PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TEMPLETON, BILL, , ,

Mailing Address 10455 STRAIT LANE

City  
DALLASState  
TXZip Code  
75229-6537FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INVESTMENTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 29 / 2022

Transaction ID : SA11A.67259

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5000.00

5000.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 11

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	--	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Joy PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ESTHER JOY KING VICTORY FUND**

Mailing Address 824 S MILLEDGE AVE  
STE 101

City  
ATHENS

State  
GA

Zip Code  
30605-1332

FEC ID number of contributing  
federal political committee.

**C** C00780874

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2022

Transaction ID : SA12.66996

Amount of Each Receipt this Period

8920.84

☐ Memo Item

TRANSFER

TRANSFER OF NET JFC FUNDS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CASTLE, JOHN, K., ,**

Mailing Address 44 COCOANUT ROW

City

PALM BEACH

State

FL

Zip Code

33480-4069

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
CASTLE HARLAN, INC.

Occupation (for Individual)  
MERCHANT BANKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 26 / 2022

Transaction ID : SA.65294.3.22Q2

Amount of Each Receipt this Period

5000.00

☒ Memo Item

TRANSFER

TRANSFER FROM ESTHER JOY KING VICTORY COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRAMM, RICH, , ,**

Mailing Address 4845 3B ROAD

City

BREMEN

State

IN

Zip Code

46506-9762

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
HEADSIGHT INC

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2022

Transaction ID : SA.65935.3.22Q2

Amount of Each Receipt this Period

2900.00

☒ Memo Item

TRANSFER

TRANSFER FROM ESTHER JOY KING VICTORY COMMITTEE

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

8920.84

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 11  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Joy PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
VANDEWALLE, LOLA, L., MS.,

Mailing Address 8029 127TH STREET

City  
BLUE GRASS

State  
IA

Zip Code  
52726-9316

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2022

Transaction ID : SA.65931.3.22Q2

Amount of Each Receipt this Period

2200.00

☒ Memo Item

TRANSFER

TRANSFER FROM ESTHER JOY KING VICTORY  
COMMITTEE

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

8920.84



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 11

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Joy PAC

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address P.O. BOX 84314

City  
BATON ROUGEState  
LAZip Code  
70884Purpose of Disbursement  
PAC CC TRANSACTION FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		28		2022

FEC Identification Number

C

Transaction ID : SB21B.I3733

Amount of Each Disbursement this Period

200.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CMDI**Mailing Address 1593 SPRING HILL ROAD  
SUITE 400City  
VIENNAState  
VAZip Code  
22182Purpose of Disbursement  
PAC SOFTWARE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2022

FEC Identification Number

C

Transaction ID : SB21B.I2612

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

250.30

250.30

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 11

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Joy PAC

Full Name (Last, First, Middle Initial)

**A. BRUCE POLIQUIN FOR CONGRESS**

Mailing Address P.O. BOX 524

City  
BANGORState  
MEZip Code  
04402Purpose of Disbursement  
CONTRIBUTION

Candidate Name

POLIQUIN, BRUCE, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☐ Primary ☒ General  
☐ Other (specify) ▼

State: ME

District: 02

GENERAL

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	0			2	0	2	2	2	2

FEC Identification Number

C C00788968

Transaction ID : SB23.I2616

Amount of Each Disbursement this Period

2900.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ESTHER FOR CONGRESS**Mailing Address 801 BEND BLVD  
APT 313City  
EAST MOLINEState  
ILZip Code  
61244Purpose of Disbursement  
CONTRIBUTION

Candidate Name

KING, ESTHER JOY, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL

District: 17

PRIMARY

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	7			2	0	2	2	2	2

FEC Identification Number

C C00716498

Transaction ID : SB23.I2613

Amount of Each Disbursement this Period

2900.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. IOWANS FOR ZACH NUNN**

Mailing Address PO BOX 11

City  
BONDURANTState  
IAZip Code  
50035Purpose of Disbursement  
CONTRIBUTION

Candidate Name

NUNN, ZACH, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA

District: 03

GENERAL

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	4			2	0	2	2	2	2

FEC Identification Number

C C00784389

Transaction ID : SB23.I2614

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

8300.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 11

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Joy PAC

Full Name (Last, First, Middle Initial)

**A. KOOLIDGE FOR CONGRESS**

Mailing Address PO BOX 14

City  
SYCAMOREState  
ILZip Code  
60178Purpose of Disbursement  
CONTRIBUTION

Candidate Name

KOOLIDGE, MICHAEL, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL

District: 14

PRIMARY

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	0			2	0	2	2		

FEC Identification Number

C C00794537

Transaction ID : SB23.I2615

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RODNEY FOR CONGRESS**

Mailing Address PO BOX 344

City  
TAYLORVILLEState  
ILZip Code  
62568-0344Purpose of Disbursement  
CONTRIBUTION

Candidate Name

DAVIS, RODNEY, L, ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL

District: 15

PRIMARY

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	6			2	0	2	2		

FEC Identification Number

C C00521948

Transaction ID : SB23.I2617

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SCHELLER FOR CONGRESS, INC.**

Mailing Address PO BOX 3855

City  
ALLEN TOWNState  
PAZip Code  
18106Purpose of Disbursement  
CONTRIBUTION

Candidate Name

SCHELLER, LISA, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☐ Primary ☒ General  
☐ Other (specify) ▼

State: PA

District: 07

GENERAL

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			3	0			2	0	2	2		

FEC Identification Number

C C00722892

Transaction ID : SB23.I2679

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

5500.00

**TOTAL** This Period (last page this line number only).....▶

13800.00